

<i>SERFF Tracking Number:</i>	<i>META-125552548</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Metropolitan Life Insurance Company.</i>	<i>State Tracking Number:</i>	<i>38443</i>
<i>Company Tracking Number:</i>	<i>I08-06</i>		
<i>TOI:</i>	<i>LTC03I Individual Long Term Care</i>	<i>Sub-TOI:</i>	<i>LTC03I.001 Qualified</i>
<i>Product Name:</i>	<i>Individual LTCI Advertising</i>		
<i>Project Name/Number:</i>	<i>I08-06/I08-06</i>		

## Filing at a Glance

Company: Metropolitan Life Insurance Company.

Product Name: Individual LTCI Advertising	SERFF Tr Num: META-125552548	State: ArkansasLH
TOI: LTC03I Individual Long Term Care	SERFF Status: Closed	State Tr Num: 38443
Sub-TOI: LTC03I.001 Qualified	Co Tr Num: I08-06	State Status: Filed-Closed
Filing Type: Advertisement	Co Status:	Reviewer(s): Harris Shearer
	Author: Mary Rinaldi	Disposition Date: 04/15/2008
	Date Submitted: 03/18/2008	Disposition Status: Filed-Closed
Implementation Date Requested: On Approval		Implementation Date:

State Filing Description:

## General Information

Project Name: I08-06	Status of Filing in Domicile: Authorized
Project Number: I08-06	Date Approved in Domicile:
Requested Filing Mode: Review & Approval	Domicile Status Comments:
Explanation for Combination/Other:	Market Type: Individual
Submission Type: New Submission	Group Market Size:
Overall Rate Impact:	Group Market Type:
Filing Status Changed: 04/21/2008	
State Status Changed: 04/21/2008	Deemer Date:
Corresponding Filing Tracking Number:	
Filing Description:	
Re: MetLife Filing No. I08-06	
Metropolitan Life Insurance Company ("MetLife")	
Individual Long-Term Care Insurance Advertising	
NAIC Company No. 65978 - FEIN No. 13-5581829	

Dear Sir/Madam:

We enclose for filing electronic copies of the Individual long-term care advertising materials described below. The

SERFF Tracking Number: META-125552548 State: Arkansas  
Filing Company: Metropolitan Life Insurance Company. State Tracking Number: 38443  
Company Tracking Number: I08-06  
TOI: LTC03I Individual Long Term Care Sub-TOI: LTC03I.001 Qualified  
Product Name: Individual LTCI Advertising  
Project Name/Number: I08-06/I08-06

materials are intended for use with the following approved Individual long-term care policy forms LTC2-IDEAL AR, LTC2-PREM AR, LTC2-VAL AR, LTC2-FAC AR approved by your Department on January 13, 2005.

The advertising material is similar to ADF#1369.04 (Rev. 12/05) approved by your Department on March 30, 2006. The only change to the brochure is under the heading "How Your Coverage Works", the text "Nurse Care Manager" has been changed to "Care Coordinator" throughout the statement.

Advertising Form Number	Brief Description of Invitation to Contract Advertising Material
ADF#1369.04(Rev.11/07)	Generic Product Folder Brochure

Please note the only change to the brochure is under the heading "How Your Coverage Works", the text "Nurse Care Manager" has been changed to "Care Coordinator" throughout the statement.

Variable material will be modified in accordance with the enclosed Explanation of Variables.

The NAIC form is enclosed and the filing fee check has been mailed to your Department.

Please advise us of your action on this submission in accordance with your usual procedures.

If you have any questions or comments, please do not hesitate to contact me.

Sincerely,  
Mary J. Rinaldi  
Consultant-Compliance Marketing/AD

## Company and Contact

### Filing Contact Information

Mary Rinaldi, Consultant- Compliance	mrinaldi@metlife.com
MKTG/AD	
Green Farms Road	(203) 221-3859 [Phone]
Westport, CT 06880	

SERFF Tracking Number:	META-125552548	State:	Arkansas
Filing Company:	Metropolitan Life Insurance Company.	State Tracking Number:	38443
Company Tracking Number:	I08-06		
TOI:	LTC03I Individual Long Term Care	Sub-TOI:	LTC03I.001 Qualified
Product Name:	Individual LTCI Advertising		
Project Name/Number:	I08-06/I08-06		

**Filing Company Information**

Metropolitan Life Insurance Company.	CoCode: 65978	State of Domicile: New York
1MetLife Plaza	Group Code: -99	Company Type: Life
Long Island City, NY 11101-4015	Group Name:	State ID Number:
(111) 111-1111 ext. [Phone]	FEIN Number: 13-5581829	
	-----	

SERFF Tracking Number:	META-125552548	State:	Arkansas
Filing Company:	Metropolitan Life Insurance Company.	State Tracking Number:	38443
Company Tracking Number:	I08-06		
TOI:	LTC03I Individual Long Term Care	Sub-TOI:	LTC03I.001 Qualified
Product Name:	Individual LTCI Advertising		
Project Name/Number:	I08-06/I08-06		

## Filing Fees

Fee Required?	Yes
Fee Amount:	\$25.00
Retaliatory?	No
Fee Explanation:	per form
Per Company:	No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Metropolitan Life Insurance Company.	\$0.00	03/18/2008	

CHECK NUMBER	CHECK AMOUNT	CHECK DATE
000904235	\$25.00	03/13/2008

SERFF Tracking Number:	META-125552548	State:	Arkansas
Filing Company:	Metropolitan Life Insurance Company.	State Tracking Number:	38443
Company Tracking Number:	I08-06		
TOI:	LTC03I Individual Long Term Care	Sub-TOI:	LTC03I.001 Qualified
Product Name:	Individual LTCI Advertising		
Project Name/Number:	I08-06/I08-06		

## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Filed-Closed	Harris Shearer	04/21/2008	04/21/2008

<i>SERFF Tracking Number:</i>	<i>META-125552548</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Metropolitan Life Insurance Company.</i>	<i>State Tracking Number:</i>	<i>38443</i>
<i>Company Tracking Number:</i>	<i>I08-06</i>		
<i>TOI:</i>	<i>LTC03I Individual Long Term Care</i>	<i>Sub-TOI:</i>	<i>LTC03I.001 Qualified</i>
<i>Product Name:</i>	<i>Individual LTCI Advertising</i>		
<i>Project Name/Number:</i>	<i>I08-06/I08-06</i>		

## Disposition

Disposition Date: 04/15/2008

Implementation Date:

Status: Filed-Closed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number:	META-125552548	State:	Arkansas
Filing Company:	Metropolitan Life Insurance Company.	State Tracking Number:	38443
Company Tracking Number:	I08-06		
TOI:	LTC03I Individual Long Term Care	Sub-TOI:	LTC03I.001 Qualified
Product Name:	Individual LTCI Advertising		
Project Name/Number:	I08-06/I08-06		

Item Type	Item Name	Item Status	Public Access
Supporting Document	cover letter	Filed-Closed	Yes
Supporting Document	NAIC Form	Filed-Closed	Yes
Supporting Document	Explanation of Variables	Filed-Closed	Yes
Form	Generic Product Folder Brochure	Filed-Closed	Yes

SERFF Tracking Number:	META-125552548	State:	Arkansas
Filing Company:	Metropolitan Life Insurance Company.	State Tracking Number:	38443
Company Tracking Number:	I08-06		
TOI:	LTC03I Individual Long Term Care	Sub-TOI:	LTC03I.001 Qualified
Product Name:	Individual LTCI Advertising		
Project Name/Number:	I08-06/I08-06		

## Form Schedule

**Lead Form Number:** ADF#1369.04(Rev.11/07)

Review Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Filed-Closed	ADF#1369.04(Rev.11/07)	Advertising	Generic Product Folder Brochure	Revised	Replaced Form #: ADF#1369.04(Rev.12/05) Previous Filing #: NA	0	ADF#1369.04 (Rev.1107)_Generic Product Folder.pdf



# Preparing for the Future

**MetLife<sup>®</sup>**



## *Planning for Longevity*



# How Will You Live in the Future?

**Y**ou're preparing to live a long life. You've made sound investment decisions to ensure a stable and comfortable financial future for yourself and your family. However, planning for longevity also means planning for proper care and taking steps to ensure your independence. Perhaps you are someone who's already familiar with what it means to need long-term care services. Maybe you are a couple looking ahead to a comfortable future together at home. Or maybe you're looking to maintain your independence and quality of life in retirement.

Whatever your situation is, now is the time to consider how your life might change should you experience an injury or illness that requires you to need long-term care services. Getting ill is something that no one likes to think about — something that no one thinks will ever happen to them. The fact is, people are living longer than ever. The older you are, the greater the likelihood you'll need long-term care at some point in your life.

*The choices you make today can determine how you and your family will live and where you will live in the future.*



## Long-Term Care Can Pose Emotional Challenges

Think about the many ways that a long-term care need could impact your family and friends. Will they be able to devote sufficient time to care for you? If they're working, they may have to reduce their work schedule or leave their job entirely. Could they afford the loss of income — and would you feel comfortable with the sacrifices your caregivers may have to make?

Keep in mind that whether they are working or not, the responsibilities of caregivers can be quite demanding. In fact, assisting you with your long-term care needs could be one of the most demanding situations your family and friends will ever encounter. Even if their intentions are good, will they be physically and emotionally capable of providing you with the care you need?

## Long-Term Care Services Can Drain You Financially

You may find yourself wondering how your lifestyle would be affected. Long-term care services can be expensive, and can deplete your income and assets, especially your retirement plan. Having the financial resources to pay for care is just one of many challenges you may have to confront. The money you have worked hard to set aside for retirement should be protected from the costs of care, should you need it.

## Be Prepared to Make the Right Choices About Your Care

If your friends and family are not able to provide long-term care on a regular basis, how prepared are you to find additional help? Do you know the care options available to you? How much do care options cost? Do you know how to find available care in your community?

• Not a Deposit or Other Obligation of Bank • Not FDIC - Insured • Not Insured by Any Federal Government Agency  
• Not Issued, Guaranteed or Underwritten by Bank or FDIC  
• Not a Condition to the Provision or Term of Any Banking Service or Activity • Policy is an Obligation of the Issuing Insurance Company

## How will you pay for your care?

You've worked your entire life to help ensure an enjoyable retirement for yourself and your loved ones. Think about how the considerable expenses associated with long-term care services could deplete your retirement savings — maybe even before retirement. Long-Term Care Insurance can help allow you to use your retirement funds for the purpose for which they were intended: *your retirement*.

### Cost of Care in Your Area

City, State	Approximate Annual Care Costs		
	Home Care <sup>(1)</sup> (5 hrs/day x 5 days/wk)	Assisted Living/ Residential Care Facility <sup>(2)</sup> (7 days/week)	Nursing Home <sup>(2)</sup> (7 days/wk)
Atlanta, GA	\$ 22,100	\$ 33,708	\$ 58,035
Austin, TX	\$ 22,100	\$ 39,864	\$ 46,720
Boston, MA	\$ 29,900	\$ 54,336	\$100,740
Columbus, OH	\$ 23,400	\$ 40,284	\$ 64,970
Denver, CO	\$ 28,600	\$ 28,644	\$ 60,955
Des Plaines Area/ Highland Park, IL	\$ 27,300	\$ 53,052	\$ 70,445
Grand Rapids, MI	\$ 23,400	\$ 33,144	\$ 75,920
Miami, FL	\$ 19,500	\$ 32,616	\$ 64,240
New York, NY	\$ 20,800	\$ 36,528	\$124,100
Philadelphia, PA	\$ 22,100	\$ 41,028	\$ 82,855
Portland, OR	\$ 26,000	\$ 29,136	\$ 71,540
Raleigh-Durham, NC	\$ 24,700	\$ 32,268	\$ 59,130
San Francisco, CA	\$ 29,900	\$ 39,660	\$ 81,760
Seattle, WA	\$ 29,900	\$ 34,008	\$ 81,760
St. Louis, MO	\$ 22,100	\$ 39,804	\$ 49,640
Stamford, CT	\$ 28,600	\$ 58,320	\$124,465
Tucson, AZ	\$ 20,400	\$ 38,112	\$ 60,955
Washington, DC	\$ 24,700	\$ 60,372	\$ 96,360
National Average	\$ 24,700	\$ 35,628	\$ 68,985

(1) MetLife Mature Market Institute, "The MetLife Market Survey of Adult Day Services & Home Care Costs," September 2007.

(2) MetLife Mature Market Institute, "The MetLife Market Survey of Nursing Home & Assisted Living Costs," October 2007.



### Consider your monthly expenses

Sometimes it's hard to appreciate the magnitude of the cost of long-term care services. Consider the cost of your everyday living expenses, such as your mortgage or rent payment, your utilities and your car payment(s). Sometimes we may think that these are high; however, compare them to the national average cost of long-term care services.

#### Approximate National Average Monthly Costs for Long-Term Care Services:

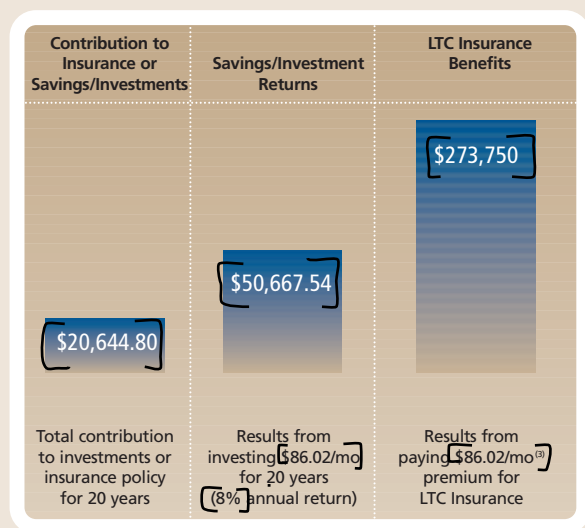
Home Care.....	\$2,058 <sup>(1)</sup>
Assisted Living Facility Care.....	\$2,969 <sup>(2)</sup>
Nursing Home Care .....	\$5,749 <sup>(2)</sup>

Would home care be an expense you could afford in addition to your current living expenses?



## Purchasing insurance may be wiser than investing the same money when it comes to covering long-term care ("LTC") expenses

For example, consider what you could do with **\$86.02<sup>(3)</sup> per month (insurance vs. investing)**



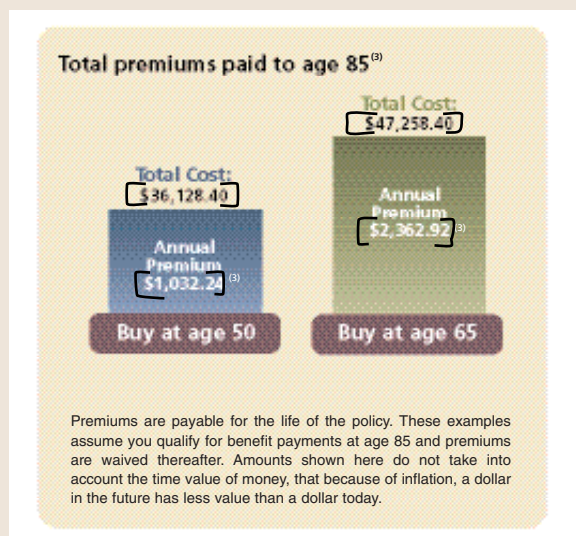
If you invested **\$86.02** a month for 20 years, with an average annual yield of **8%** compounded monthly: At the end of 20 years, you will have saved **\$50,667.54** to spend on long-term care services. You would have to wait the full 20 years for that amount to be saved – and you could need long-term care services before then.

If you took the same **\$86.02<sup>(3)</sup>** and used it to pay monthly premiums for a Long-Term Care Insurance policy: Although the overall amount of money set aside is the same — **\$20,644.80** — the insurance-based example results in **\$223,082.46<sup>(4)</sup>** **more** to cover long-term care services (Total Lifetime Benefit of **\$273,750<sup>(4)</sup>**). Additionally, you would have access to the full amount at any time during that 20-year period, if you became eligible for benefits and satisfied any applicable elimination period.

## Purchasing coverage today may cost you less in the long run

Consider the advantages of purchasing coverage at your current age:

- **Pay a lower premium.** Your premium rate is based in part on your age at application, and it may never be lower than it is today. By applying later, chances are your premiums may be higher.
- **Pay less in total premiums over time.** Even though you'll pay premiums for a longer period of time, your annual premium could be lower.
- **Avoid the risk.** You may not qualify later if your health changes or if you have an accident or illness.



(3) Example is based on a 50-year old purchasing a Value policy with Indemnity Rider, with a \$150 Daily Benefit Amount, a 1,825 day (5-year) Benefit Period, a 100 day Elimination Period, and no inflation protection, assuming premiums are paid on a monthly basis and premium rates do not increase. The premium amount quoted is for illustrative purposes only. Premiums will vary based on age at application, policy design and policy features selected.

(4) Fulfillment of benefit eligibility requirements, and elimination period (if applicable), is required in order to be eligible for benefit payment.

## Five Questions You Need to Ask Yourself When Building a MetLife Long-Term Care Insurance Policy

### 1 Where would you like to receive care?

You can choose a comprehensive policy that will cover care at home, in an adult day care center, assisted living/residential care facility, hospice facility or in a nursing home. Some policies can also cover care provided by friends or relatives (informal care).

You can choose from the following comprehensive policies: **Value**, **Ideal** and **Premier**. Or, you can choose the **Facilities-Only**<sup>(5)</sup> policy, which will only cover care received in a long-term care facility.

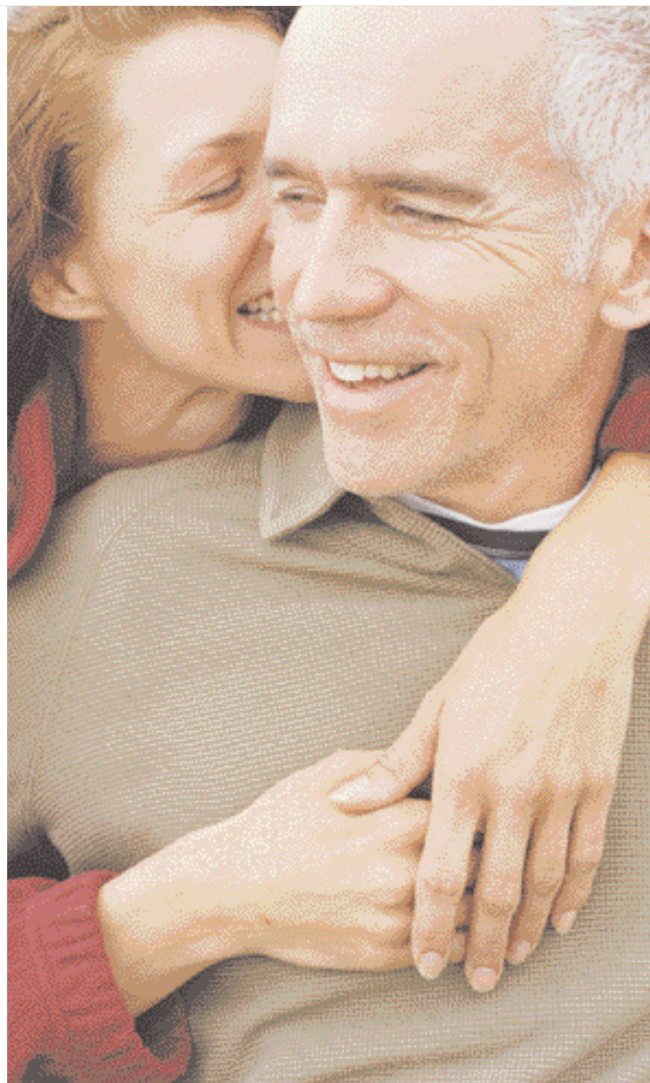
### 2 How would you like to receive your benefits?

You have a choice of one of three ways to receive your benefits:

**Daily Reimbursement** – The Value policy pays up to your Maximum Daily Benefit Amount (“DBA”) for covered services received.

**Monthly Reimbursement** – Both the Ideal and Facilities-Only policies pay benefits on a monthly basis, for covered services you receive at any time during the calendar month. The most we will pay in any given month is your Maximum DBA times the number of days in a calendar month.

**Cash Payment** – Once you are eligible for benefit payments, the Premier policy pays your DBA regardless of whether services are received and without having to submit bills (though proof of confinement in a facility is required to qualify for payment of the Facility DBA). This policy provides you with the maximum amount of flexibility, as benefits can be used for informal care services.<sup>(6)</sup>



*Choose MetLife for coverage you can rely on to help protect your assets and help preserve your future independence*

(5) Facilities-Only policy is not available in Georgia, Oregon, Rhode Island or Vermont.

(6) Any per diem benefits paid without regard to the actual charges you incur may be subject to income tax to the extent that they exceed the greater of: (a) your expense for qualified long-term care services, or (b) the IRS per diem exclusion amount **\$270 in 2008**.

Tax results may vary depending on individual circumstances. You should consult with, and rely on, your own independent tax counsel concerning your individual tax results.

Circular 230 Notice: The information contained in this brochure is not intended to (and cannot) be used by anyone to avoid IRS penalties. This brochure supports the promotion and marketing of this long term care insurance product.

### 3 How much coverage is right for you?

Your MetLife Representative/Insurance Agent/Producer can provide you with the average cost of care in your area. You may be planning to cover all of your long-term care needs, or just a portion of them. Both are perfectly good decisions, it just depends on your situation.

**Nursing Home DBAs available: \$50 to \$400 (in \$10 increments)<sup>(7)</sup>**

**If you are considering a comprehensive policy, you need to decide if you want your policy to pay 100%, 75% or 50% of your Nursing Home DBA for home and community-based care.<sup>(8)</sup>**

**Note:** For the Value policy, the Assisted Living Facility benefit is equal to the Home and Community Care benefit. For the Facilities-Only, Ideal and Premier policies, the Assisted Living Facility benefit is equal to the Nursing Home DBA.<sup>(9)</sup>

### 4 How long would you like your benefits to last?

The Benefit Period is the number of years (in days) that you can receive your Maximum Nursing Home DBA.

**Benefit Periods available: 2, 3, 4, 5, 7 years, or Unlimited<sup>(10)</sup>**

(With an Unlimited Benefit Period, you will receive benefits for however long you are benefit eligible with no limit on the lifetime maximum amount paid. This Benefit Period is not available with the Premier policy. In some states this Benefit Period is referred to as the “Lifetime” Benefit Period.)

The Benefit Period you select is used to calculate the total amount of benefit dollars under your policy. This “Total Lifetime Benefit” is equal to the Maximum Nursing Home DBA multiplied by the number of days in the Benefit Period.

Example: \$150 DBA x 5 years x 365 = \$273,750 Total Lifetime Benefit

### 5 How long do you want to wait before benefit payments begin?

Determine the number of days you want to wait after you are eligible for benefits and receiving covered services, before your benefit payments start. During this period of time, which is referred to as an Elimination Period, you are responsible for paying the cost of your long-term care services. The Elimination Period only needs to be satisfied once, and the days required to satisfy the Elimination Period do not need to be consecutive.

**Elimination Periods available: 20 days, 45 days, 100 days<sup>(11)</sup>**

(The Premier policy uses calendar days, rather than days of service, to calculate the Elimination Period.)

(7) In Wisconsin, DBA range is \$60 to \$400.

(8) In Rhode Island and South Carolina, under the Value and Ideal policies, only 100% of your Nursing Home DBA is offered for coverage for home and community based care. In Kansas, under the Value policy, only 100% of your Nursing Home DBA is offered for coverage for home and community based care.

(9) In Rhode Island and South Carolina, under the Value and Ideal policies, only 100% of your Nursing Home DBA is offered for coverage for care in an Assisted Living Facility. In Kansas, only 100% of your Nursing Home DBA is offered for coverage for care in an Assisted Living Facility.

(10) Two-year Benefit Period is not available in Arizona, Florida or Massachusetts.

(11) 100-day Elimination Period is not available in Georgia.

# How Your Coverage Works

MetLife offers Long-Term Care Insurance policies designed to help pay for care in a range of settings. Once you are determined to be eligible for benefits, and complete any applicable elimination period, you will qualify for benefit payments. A MetLife Care Coordinator will be available to help you with important decisions about your care along the way. If you do not have a care provider, your Care Coordinator can help identify long-term care resources available in your community and help you and your family coordinate your care.

Our Care Coordinators, who include Registered Nurses, have worked extensively in the community and have backgrounds that include experience with nursing homes, adult day care and home care. These caring professionals provide a high level of expertise and support. You may call your Care Coordinator directly with any questions or issues.

You will be eligible for benefits when it is verified that you require substantial assistance with two out of six activities of daily living (ADLs), or suffer from a severe cognitive impairment that requires substantial supervision. A licensed health care practitioner must certify to this. No prior hospitalization is required. The services you receive must be part of a written plan of care prepared by a licensed health care practitioner of your choice.

The need for ADL assistance must be expected to last for a period of at least 90 days. The ADLs are eating, dressing, bathing, toileting, transferring (e.g. moving into or out of a bed, chair or wheelchair) and continence.

## Why choose MetLife?

### Industry Experience

- More than 135 years of insurance experience
- One of the first companies to offer Long-Term Care Insurance
- In conjunction with another carrier, MetLife is a selected provider for the Federal Government's Long Term Care Insurance program
- MetLife is a provider of Long-Term Care Insurance for many Fortune 100 companies and associations

### Financial Strength

- High marks from leading insurance industry experts, including an A+ (Superior) rating from A.M. Best for financial strength and an AA (Very Strong) rating from Fitch for claims paying ability <sup>(12)</sup>
- MetLife is a leader in the long-term care insurance market.

(12) Ratings (as of March 2007) refer to the overall financial status of the company and are not recommendations of specific policy provisions, rates, or company practices.

### **What's Not Covered under the Value, Ideal, and Facilities-Only Policies:** <sup>(a)</sup>

No payment will be made for any of the following:

1. Treatment of alcoholism or drug addiction, unless the addiction was due to drug(s) taken on the advice of a physician.
2. Any care received while in a hospital, except in a unit specifically designated as a nursing home or hospice facility.
3. Any injury or sickness that results from: <sup>(b)</sup>
  - a. Any war, or act of war (whether declared or undeclared); or
  - b. Participation in a felony, riot, or insurrection.
4. Any intentionally self-inflicted injury.
5. Services, other than supportive services, performed by a member of the insured's immediate family. <sup>(c)</sup>
6. Any care or services received outside the United States and its territories, except as described in the International coverage section of the policy.
7. Any service or supply to the extent the expense for it is reimbursable under Medicare, or would be reimbursable but for the application of a deductible, coinsurance or copayment amount. This exclusion will not apply where Medicare is the secondary payer under applicable law.
8. Treatment received in a government facility (unless otherwise required by law); services for which benefits are available under a government program (except Medicaid); or services for which no charge is normally made in the absence of insurance.

### **Coordination of MetLife Coverages:**

If you have more than one Long-Term Care Insurance policy or certificate issued or insured by MetLife, we will reduce the benefit amounts payable to the extent necessary, so that the combination of benefits under all of these policies and certificates will not exceed one hundred percent (100%) of the actual charges for covered services.

If you are eligible to receive benefits under this policy and any other Long-Term Care Insurance policy or certificate issued or insured by MetLife with a coordination of benefits provision, then the policy or certificate with the earliest effective date will be deemed to be the primary coverage, and any other policy or certificate will be deemed secondary coverage, in order by effective date, from the earliest to the latest. Policies and certificates without a coordination of benefits provision will pay first. The Coordination of MetLife Coverages provision described here will not apply to policies or certificates which pay benefits without regard to actual charges you incur.

This advertisement describes coverage offered by Metropolitan Life Insurance Company ("MetLife"). Depending upon state availability, coverage may be offered by the following MetLife policies: LTC2-VAL, LTC2-IDEAL, LTC2-PREM, LTC2-FAC. In some states, coverage may be offered by the above-referenced policy numbers followed by the state's 2-letter abbreviation; the state's 2-letter abbreviation plus "ML" for Multi-Life policies; or the state's 2-letter abbreviation plus "P" for Partnership policies.

MetLife Long-Term Care Insurance policies are guaranteed renewable. Once a policy is issued, it cannot be cancelled due to an increase in your age or a change in your health. Premium rates can only be raised as the result of a rate increase made on a class-wide basis in the state where the policy is issued and approved by the Department of Insurance.

Like most Long-Term Care Insurance policies, MetLife's policies contain certain exclusions, limitations, elimination periods, reductions of benefits and terms for keeping them in-force. For complete costs and details, please contact your MetLife Representative/Insurance Agent/Producer.

### **What's not covered under the Premier Policy:** <sup>(a)</sup>

No payment will be made for any of the following:

1. Any injury or sickness that results from: <sup>(b)</sup>
  - a. Any war, or act of war (whether declared or undeclared); or
  - b. Participation in a felony, riot, or insurrection.
2. Any intentionally self-inflicted injury.

---

These exclusions may not apply in all states, and may vary depending on the state in which you live at the time of policy issue or the policy you select. The policy you receive once you are insured will contain the exact exclusions for your state. If you move to another state, the state guidelines where the policy was originally purchased will apply.

- (a) Riders may contain additional limitations.
- (b) In Oklahoma, exclusion is as follows:  
Any injury or sickness that results from:
  - a. Any war, or act of war, whether declared or undeclared, while serving in the military service or any auxiliary unit attached thereto; or
  - b. Participation in a felony, riot, or insurrection.
- (c) For Value and Facilities-Only policies, exclusion is as follows:  
Services performed by a member of the insured's immediate family.





<i>SERFF Tracking Number:</i>	<i>META-125552548</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Metropolitan Life Insurance Company.</i>	<i>State Tracking Number:</i>	<i>38443</i>
<i>Company Tracking Number:</i>	<i>I08-06</i>		
<i>TOI:</i>	<i>LTC03I Individual Long Term Care</i>	<i>Sub-TOI:</i>	<i>LTC03I.001 Qualified</i>
<i>Product Name:</i>	<i>Individual LTCI Advertising</i>		
<i>Project Name/Number:</i>	<i>I08-06/I08-06</i>		

## **Rate Information**

Rate data does NOT apply to filing.

<i>SERFF Tracking Number:</i>	<i>META-125552548</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Metropolitan Life Insurance Company.</i>	<i>State Tracking Number:</i>	<i>38443</i>
<i>Company Tracking Number:</i>	<i>I08-06</i>		
<i>TOI:</i>	<i>LTC03I Individual Long Term Care</i>	<i>Sub-TOI:</i>	<i>LTC03I.001 Qualified</i>
<i>Product Name:</i>	<i>Individual LTCI Advertising</i>		
<i>Project Name/Number:</i>	<i>I08-06/I08-06</i>		

## Supporting Document Schedules

<b>Satisfied -Name:</b>	cover letter	<b>Review Status:</b>	
		Filed-Closed	04/21/2008
<b>Comments:</b>			
<b>Attachment:</b>			
	AR_I_Filing Letter .pdf		

<b>Satisfied -Name:</b>	NAIC Form	<b>Review Status:</b>	
		Filed-Closed	04/21/2008
<b>Comments:</b>			
<b>Attachment:</b>			
	AR _ NAIC_Individual.pdf		

<b>Satisfied -Name:</b>	Explanation of Variables	<b>Review Status:</b>	
		Filed-Closed	04/21/2008
<b>Comments:</b>			
<b>Attachment:</b>			
	EOV_ ADF#1369.04(Rev.1107)_Generic Product Folder Brochure.pdf		

Metropolitan Life Insurance Company  
57 Greens Farms Road, Westport, CT 06880  
Tel 203 221-3859 Fax 203 221-6573  
Mrinaldi@metlife.com



**Mary J. Rinaldi**  
Long-Term Care

March 18, 2008

Commissioner of Insurance  
Arkansas Insurance Department  
1200 West 3rd Street  
Little Rock, Arkansas 72201-1904

**Re: MetLife Filing No. I08-06**  
Metropolitan Life Insurance Company ("MetLife")  
Individual Long-Term Care Insurance Advertising  
NAIC Company No. 65978 - FEIN 13-5581829

Dear Sir/Madam:

We enclose for filing electronic copies of the Individual long-term care advertising materials described below. The materials are intended for use with the following approved Individual long-term care policy forms LTC2-IDEAL AR, LTC2-PREM AR, LTC2-VAL AR, LTC2-FAC AR approved by your Department on January 13, 2005.

The advertising material is similar to ADF#1369.04 (Rev. 12/05) approved by your Department on March 30, 2006. The only change to the brochure is under the heading "How Your Coverage Works", the text "Nurse Care Manager" has been changed to "Care Coordinator" throughout the statement.

<b>Advertising Form Number</b>	<b>Brief Description of Invitation to Contract Advertising Material</b>
--------------------------------	---

ADF#1369.04(Rev. 11/07)	Generic Product Folder Brochure
-------------------------	---------------------------------

Variable material will be modified in accordance with the enclosed Explanation of Variables.

The NAIC form is enclosed and the filing fee check has been mailed to your Department.

Please advise us of your action on this submission in accordance with your usual procedures.

If you have any questions or comments, please do not hesitate to contact me.

Sincerely,

A handwritten signature in cursive script that reads "Mary J. Rinaldi".

Mary J. Rinaldi  
Consultant-Compliance Marketing/AD

**Life, Accident & Health, Annuity, Credit Transmittal Document**

Reset Form

<b>1.</b>	<b>Prepared for the State of</b>	<b>ARKANSAS</b>					
-----------	----------------------------------	-----------------	--	--	--	--	--

<b>2.</b>	<b>Department Use Only</b>						
	<b>State Tracking ID</b>						

3.	Insurer Name & Address	Domicile	Insurer License Type	NAIC Group #	NAIC #	FEIN #	STATE #
	Metropolitan Life Insurance Company Long-Term Care Insurance Division 57 Greens Farms Road Westport, CT 06881-9909	New York	A&H	241	65978	13-5581829	

4.	Contact Name & Address	Telephone #	Fax #	E-mail Address
	Mary J. Rinaldi Metropolitan Life Insurance Company Long-Term Care Insurance Division 57 Greens Farms Road Westport, CT 06881-9909	203.221.3859	203.221.6573	mrinaldi@metlife.com

<b>5.</b>	<b>Requested Filing Mode</b>	<input checked="" type="checkbox"/> Review & Approval <input type="checkbox"/> File & Use <input type="checkbox"/> Informational <input type="checkbox"/> Combination (please explain): _____ <input type="checkbox"/> Other (please explain): _____					
-----------	------------------------------	--	--	--	--	--	--

<b>6.</b>	<b>Company Tracking Number: I08-06</b>		<b>Advertising Form: ADF#1369.04(Rev.11/07)</b>				
<b>7.</b>	<input checked="" type="checkbox"/> New Submission <input type="checkbox"/> Resubmission <input type="checkbox"/> Previous file #						

<b>8.</b>	<b>Market</b>	<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Franchise					
		<b>Group</b>	<input type="checkbox"/> Small <input type="checkbox"/> Large <input type="checkbox"/> Small and Large				
			<input type="checkbox"/> Employer <input type="checkbox"/> Association <input type="checkbox"/> Blanket <input type="checkbox"/> Discretionary <input type="checkbox"/> Trust <input type="checkbox"/> Other: _____				

<b>9.</b>	<b>Type of Insurance</b>	<b>LTC031 Individual Long-Term Care Insurance</b>					
-----------	--------------------------	---	--	--	--	--	--

<b>10.</b>	<b>Product Coding Matrix Matix Filing Code</b>	<b>LTC031.001 - Qualified</b>					
------------	--	-------------------------------	--	--	--	--	--

11.	Submitted Documents	<input type="checkbox"/> <b>FORMS</b> <input type="checkbox"/> Policy <input type="checkbox"/> Outline of Coverage <input type="checkbox"/> Certificate <input type="checkbox"/> Application <input type="checkbox"/> Rider/Endorsement <input checked="" type="checkbox"/> Advertising <input type="checkbox"/> Schedule of Benefits <input type="checkbox"/> Other  <input type="checkbox"/> <b>RATES</b> <input type="checkbox"/> New Rate <input type="checkbox"/> Revised Rate  <input type="checkbox"/> <b>FILING OTHER THAN FORM OR RATES:</b> _____ Please explain:  <b>SUPPORTING DOCUMENTATION</b> <input type="checkbox"/> Articles of Incorporation <input type="checkbox"/> Third Party Authorization <input type="checkbox"/> Association Bylaws <input type="checkbox"/> Trust Agreements <input type="checkbox"/> Statement of Variability <input type="checkbox"/> Certifications <input type="checkbox"/> Actuarial Memorandum <input type="checkbox"/> Other: _____
12.	Filing Submission Date	March , 2008
13.	Filing Fee (If required)	Amount \$25.00 . _____ Check Date March 13, 2008 Retaliatory <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Check Number 000904235
14.	Date of Domiciliary Approval	NA New York does not require LTCI advertising to be filed.
15.	Filing Description: <b>INDIVIDUAL LONG-TERM CARE INSURANCE ADVERTISING MATERIAL(S)</b>  <b>PLEASE SEE COVER LETTER</b>	

**View Complete Filing Description**

16.	<b>Certification (If required)</b>	
<b>I HEREBY CERTIFY</b> that I have reviewed the applicable filing requirements for this filing, and complies with all applicable statutory provisions for the state of <u>ARKANSAS</u>		
Print Name <u>Mary J. Rinaldi</u>		Title: <u>Consultant-Compliance/Marketing/AD</u>
Original Signature <u><i>Mary J. Rinaldi</i></u>		Date <u>March 18, 2008</u>

<b>17.</b>	<b>Form Filing Attachment</b>	
<b>This filing transmittal is part of company tracking number</b>		<b>I08-06</b>
<b>This filing corresponds to rate filing company tracking number</b>		

	<b>Document Name</b>	<b>Form Number</b>		<b>Replace Form Number</b>
	<b>Description</b>			<b>Previous State Filing Number</b>
01	Generic Product Folder Brochure	ADF#1369.04 (Rev. 11/07)	<input checked="" type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other	ADF#1369.04 (Rev. 12/05)
02			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other	
03			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other	
04			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other	
05			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other	
06			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other	
07			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other	
08			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other	
09			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other	
10			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other	
11			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other	
12			<input type="checkbox"/> Initial <input type="checkbox"/> Revised <input type="checkbox"/> Other	

LH FFA-1

<b>18.</b>		<b>Rate Filing Attachment</b>		
This filing transmittal is part of company tracking number				
This filing corresponds to form filing company tracking number				
Overall percentage rate impact for this filing		%		
	<b>Document Name</b>	<b>Affected Form Numbers</b>		<b>Previous State Filing Number</b>
	<b>Description</b>			
01			<input type="checkbox"/> New <input type="checkbox"/> Revised Request + ____% - ____% <input type="checkbox"/> Other _____	
02			<input type="checkbox"/> New <input type="checkbox"/> Revised Request + ____% - ____% <input type="checkbox"/> Other _____	
03			<input type="checkbox"/> New <input type="checkbox"/> Revised Request + ____% - ____% <input type="checkbox"/> Other _____	
04			<input type="checkbox"/> New <input type="checkbox"/> Revised Request + ____% - ____% <input type="checkbox"/> Other _____	
05			<input type="checkbox"/> New <input type="checkbox"/> Revised Request + ____% - ____% <input type="checkbox"/> Other _____	
06			<input type="checkbox"/> New <input type="checkbox"/> Revised Request + ____% - ____% <input type="checkbox"/> Other _____	
07			<input type="checkbox"/> New <input type="checkbox"/> Revised Request + ____% - ____% <input type="checkbox"/> Other _____	
08			<input type="checkbox"/> New <input type="checkbox"/> Revised Request + ____% - ____% <input type="checkbox"/> Other _____	
09			<input type="checkbox"/> New <input type="checkbox"/> Revised Request + ____% - ____% <input type="checkbox"/> Other _____	

LH RFA-1



Metropolitan Life Insurance Company  
NAIC: 241-65978

## EXPLANATION OF VARIABLE MATERIAL

### Generic Product Folder Brochure

ADF#1369.04 (Rev. 11/07)

There are two types of variable material set forth in brackets within the enclosed form. These are:

1. Illustrative material; and
2. Specific variable material

#### Illustrative Material

Illustrative material consists of entries such as dates, numbers, percentages, sources, and administrative codes, all which may be varied.

#### Specified Variable Material

Specific variable material will be changed only as indicated in the explanation set forth below.

#### Section

#### Explanation

Bottom of Page 2	The Bank Bullets (FDIC) are bracketed because this piece will be used by two distribution channels. One of which requires that the Bank Bullets appear and one that does not use them at all.
Page 3	Cost of Care in Your Area chart is bracketed, along with corresponding footnotes because the Mature Market Institute updates their findings on the cost of long term care every year. National Monthly Costs of Care is also bracketed to be updated with the new Mature Market Institute findings each year.
Page 4	\$86.02, \$20,644.80, \$50,667.54, 8%, \$223,082.46, \$273,750, \$36,128.40, \$1,032.24, \$47,258.40, and \$2,362.92 are bracketed in the event that if rates ever change (on a class wide basis) the numbers can be adjusted accordingly.
Page 5	\$270 in 2008 is bracketed because this number is updated each year by tax.
Page 7	135 is bracketed because it is the number of years that MetLife has been in the insurance business and that will increase each year. The bullet under the heading, "Financial Strength" is bracketed in case those ratings change in the future. The corresponding footnote date is bracketed for updating as well.